

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS	19	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	19 minus 20=	0
INDEPENDENT CLAIMS	3 minus 3=	0
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

SMALL ENTITY
TYPE OR OTHER THAN
SMALL ENTITY

RATE	FEE	RATE	FEE
BASIC FEE	355.00	BASIC FEE	710.00
X\$ 9=	<input checked="" type="checkbox"/>	X\$18=	<input checked="" type="checkbox"/>
X40=	<input checked="" type="checkbox"/>	X80=	<input checked="" type="checkbox"/>
+135=	<input checked="" type="checkbox"/>	+270=	<input checked="" type="checkbox"/>
TOTAL	<input checked="" type="checkbox"/>	TOTAL	710

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Minus	**	=
Independent	* 3	Minus	*** 3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

SMALL ENTITY OR OTHER THAN
SMALL ENTITY

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=	<input type="checkbox"/>	X\$18=	<input checked="" type="checkbox"/>
X40=	<input type="checkbox"/>	X80=	<input type="checkbox"/>
+135=	<input type="checkbox"/>	+270=	<input type="checkbox"/>
TOTAL ADDITIONAL FEE	<input type="checkbox"/>	TOTAL ADDITIONAL FEE	181

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Minus	**	=
Independent	* 3	Minus	*** 3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=	<input type="checkbox"/>	X\$18=	<input type="checkbox"/>
X40=	<input type="checkbox"/>	X80=	<input type="checkbox"/>
+135=	<input type="checkbox"/>	+270=	<input type="checkbox"/>
TOTAL ADDITIONAL FEE	<input type="checkbox"/>	TOTAL ADDITIONAL FEE	<input type="checkbox"/>

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Minus	**	=
Independent	* 3	Minus	*** 3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=	<input type="checkbox"/>	X\$18=	<input type="checkbox"/>
X40=	<input type="checkbox"/>	X80=	<input type="checkbox"/>
+135=	<input type="checkbox"/>	+270=	<input type="checkbox"/>
TOTAL ADDITIONAL FEE	<input type="checkbox"/>	TOTAL ADDITIONAL FEE	<input type="checkbox"/>

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.